



Certified Prevention Professional (CPP)
Record of Continuing Education Units (CEUs)

1. Please photocopy or print this blank form, if you need additional pages.
2. Please list a minimum of twenty (20) hours of Alcohol, Tobacco and Other Drugs (ATOD) Prevention Education AND a minimum of twenty (20) hours of General Prevention Education for a minimum of forty (40) total hours.
3. Attach a proof of attendance (i.e. transcripts with course description, certificates and /or Affidavits of Attendance) for each listed training/event.
4. Keep a copy of this completed form and attachments for your records.

Name:		CPP Number:	
Mailing Address:			
Phone Number:		Date Due:	
Email Address:		Date Submitted:	

Title of Training/Other Event Where CEUs Were Obtained	Location & Date(s) of Training/Other Event	Training/Other Event Sponsor	ATOD Prevention Education Hours	General Prevention Education Hours	Total Hours
TOTALS (This Page)					



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Title of Training/Other Event Where CEUs Were Obtained	Location & Date(s) of Training/Other Event	Training/Other Event Sponsor	ATOD Prevention Education Hours	General Prevention Education Hours	Total Hours
TOTALS (This Page)					
Total ATOD Prevention Education Hours Submitted: Minimum of Twenty (20) Hours					
Total General Prevention Hours Submitted: Minimum of Twenty (20) Hours					
GRAND TOTAL Renewal Hours Submitted: Minimum of Forty (40) Hours					